

PRETRIAL SERVICES ACT
MONTHLY REPORT

Locality: _____

Grant Number: _____

Report For: ____/____
MM YYPoint of Intervention (select one):
____ At Initial Bail Hearing
____ Prior to Arraignment

<u>I. Supervision Case Activity</u>	<u>Misd.</u>	<u>YTD</u>	<u>Felony</u>	<u>YTD</u>
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DO NOT include cases which are monitored. Use Section IV to report these.

1. Total # Defendants Under Active Supervision on First Day of the Month				
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2. Total # Defendants Under Inactive Status on First Day of the Month				
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3. Total Placements on Supervision (Sum A..F)				
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- A. Transferred In From Other Programs
- B. Court Reinstatement
- C. On Secure Bond & Supervision
- D. Direct Placement
- E. Based on Program Recommendation
- F. Against Program Recommendation

4. Total Restored to Active Supervision				
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5. Total # of Cases Closed (A + B + C)				
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A. Total Successful Cases (1 + 2 + 3)				
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- 1. Transferred Out-Returned
- 2. New Placements
- 3. Reinstated

B. Total Unsuccessful Completions (1 + 2 + 3)				
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- 1. Total Failures to Appear (a + b + c)
 - a) *Transferred Out-Returned*
 - b) *New Placements*
 - c) *Reinstated*
- 2. Total New Arrests (a + b + c)
 - a) *Transferred Out-Returned*
 - b) *New Placements*
 - c) *Reinstated*
- 3. Total Technical Violations (a + b + c)
 - a) *Transferred Out-Returned*
 - b) *New Placements*
 - c) *Reinstated*

C. Total Other Case Closures (1 + 2)				
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- 1. Transferred In-Sent Back
- 2. Other _____

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<u>Supervision Case Activity (con't)</u>	<u>Misd.</u>	<u>YTD</u>	<u>Felony</u>	<u>YTD</u>
6. Total Placed on Inactive Status	_____	_____	_____	_____
7. Total # of Defendants Under Inactive Status Last Day of Month	_____	_____	_____	_____
8. Total # of Defendants Under Active Supervision on Last Day of Month	_____	_____	_____	_____
9. Total # Supervision Days (A + B)	_____	_____	_____	_____
A. Total for Carry-Over Cases (1 + 2)	_____	_____	_____	_____
1. Closed Cases	_____	_____	_____	_____
2. Active Cases	_____	_____	_____	_____
B. Total for New Cases (1 + 2)	_____	_____	_____	_____
1. Closed Cases	_____	_____	_____	_____
2. Active Cases	_____	_____	_____	_____

<u>II. System Performance Data</u>	<u>Misd.</u>	<u>YTD</u>	<u>Felony</u>	<u>YTD</u>
1. Total # Admissions to Jail Awaiting Trial	_____	_____	_____	_____
2. # Defendants Awaiting Trial Available at Screening	_____	_____	_____	_____
3. Total # Defendants Screened Out (Sum A...F)	_____	_____	_____	_____
A. Drunk in Public	_____	_____	_____	_____
B. J&DR Court Juvenile Defendant	_____	_____	_____	_____
C. Federal/U.S. Marshall's Office Hold(s)	_____	_____	_____	_____
D. Parole Violator	_____	_____	_____	_____
E. Detainer(s)	_____	_____	_____	_____
F. Other: _____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
4. Total # Defendants <u>Investigated</u>	_____	_____	_____	_____
5. Total # Defendants Not Investigated (Sum A...E)	_____	_____	_____	_____
A. Debilitated Due to Drugs/Alcohol/Medical Condition at Time of Interview	_____	_____	_____	_____
B. Behavior Not Conducive to Interview	_____	_____	_____	_____
C. Refused Interview	_____	_____	_____	_____
D. Released on Bond Before Interview	_____	_____	_____	_____
E. Other: _____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
6. Total # Criminal Record Checks	_____	_____	_____	_____

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II. System Performance Data (con't)**Misd.****YTD****Felony****YTD****7. Total # Defendants Recommended for:****A. PR (w/out supervision) (1 + 2)**

1. Accepted by Court
2. Rejected by Court

B. Supervised Release (w/PR bond) (1 + 2)

1. Accepted by Court
2. Rejected by Court

C. Supervised Release (w/ secure bond) (1 + 2)

1. Accepted by Court
2. Rejected by Court

D. Reduced Bond (1 + 2)

1. Accepted by Court
2. Rejected by Court

E. Same Bond (1 + 2)

1. Accepted by Court
2. Rejected by Court

8. # Cases Closed by Placement as:**A. Successful**

1. On Secure Bond & Supervision
2. Direct Placement
3. Based on Program Recommendation
4. Against Program Recommendation

B. Unsuccessful

1. On Secure Bond & Supervision
2. Direct Placement
3. Based on Program Recommendation
4. Against Program Recommendation

III. New Placements on Services

Report the number of defendants who were placed on services during this month

Misd.**YTD****Felony****YTD****A. Substance Abuse Testing****B. Substance Abuse Education****C. Substance Abuse Counseling****D. Short-term Detox (3-7 days)****E. Long-term Inpatient Tx (28+ days)****F. Electronic Monitoring (EM)****G. Home Incarceration (w/out EM)****H. Other: _____**

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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IV. Monitoring Case Activity*For defendants released on a Summons or ROR by Magistrate:*

	<u>Misd.</u>	<u>YTD</u>	<u>Felony</u>	<u>YTD</u>
1. Total # Defendants Under Monitoring on First Day of the Month	_____	_____	_____	_____
2. Total # New Monitoring Placements	_____	_____	_____	_____
3. Total # Monitoring Cases Closed (A + B + C)	_____	_____	_____	_____
A. Successful	_____	_____	_____	_____
B. Unsuccessful	_____	_____	_____	_____
C. Other:	_____	_____	_____	_____
4. Total # Defendants Under Monitoring on Last Day of the Month	_____	_____	_____	_____

V. Certification

I hereby certify that the information provided in this report is true and correct to the best of my knowledge.

Signature of Project Director_____
Date